Application or Docket Number

A

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

5004-4500

CLAIMS AS FILED - PART I (Column 1) (Co						nn 2)		SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS 12								RATE	FEE		RATE	∴FEE
FOR			NUMBER FILED		NUMBE	R EXTRA	BA	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/ 2 minus 20=		*	9		X\$ 9=	.,	OR	X\$18=	. •
INDEPENDENT CLAIMS			7 minus 3 =		*	4		X42=		OR	X84=	336.00
MULTIPLE DEPENDENT CLAIM PRESENT						′ 🔲		+140=		OR	+280=	
*If the difference in column 1 is less than zero, enter					r "0" in co	olumn 2	-	OTAL	178	OR	TOTÁL	107600
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							s	MALL E	NTITY	OR	OTHER SMALL I	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 42	Minus	** 2	0	= 22		X\$ _. 9= .		OR	X\$18=	396
AME	Independent	* 9	Minus	***	T CLAIM	= 2		X42=		OŖ	X84=	168
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA								+140=.		OR	+280=	م سننت
Professional Communication of the Communication of							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	564
(Column 1) (Column 2) (Column 3)										:	•	•
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T () 4 13 4	-	1	X42=		OR	X84=	
Ļ	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	I CLAIM		<u>ا</u> [+140=		OR	+280=	
							L	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		DII. FEE I			ADDI1.1 CL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT						┚┢	+140=		OR	+280=	
		L	TOTAL			TOTAL						
***	* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, nter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											